

ECS/EMD Configuration Change Request

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Page(s)

1. Originator Natisha Greenway	2. Log Date: 2/9/05	3. CCR #: 05-0048	4. Rev:	5. Tel: 301-925-1079	6. Rm #: 3010G	7. Org. DEV COTS
8. CCR Title: Implement NFS Mount points for NSIDC						
9. Originator Signature/Date Natisha Greenway /s/ 2/9/05			10. Class II	11. Type: CCR	12. Need Date: 2.21.05	
13. CCR Sponsor Signature/Date Pamela Johnson /s/ 2/9/05			14. Category of Change: Other		15. Priority: (If "Emergency" fill in Block 27). Routine	
16. Documentation/Drawings Impacted (Review and submit checklist): 920-TDN-008 Rev 19			17. Schedule Impact: n/a		18. CI(s) Affected:	
19. Release Affected by this Change: 7.00		20. Date due to Customer:		21. Estimated Cost: None - Under 100K		
22. Source Reference: <input type="checkbox"/> NCR (attach) <input type="checkbox"/> Action Item <input type="checkbox"/> Tech Ref. <input type="checkbox"/> GSFC <input type="checkbox"/> Other:						
23. Problem: (use additional Sheets if necessary) Mount points need to be updated for NSIDC (if necessary) and 920-TDN-008 Rev 19 posted to reflect changes and current configurations.						
24. Proposed Solution: (use additional sheets if necessary) Update the mount points as specified in the attached spreadsheet for revision 19 of NSIDC spreadsheets. Spreadsheets "920-TDN-008 Rev 19" will need to be posted.						
25. Alternate Solution: (use additional sheets if necessary) none						
26. Consequences if Change(s) are not approved: (use additional sheets if necessary) Changes will not be updated and current configurations will not be reflected.						
27. Justification for Emergency (If Block 15 is "Emergency"):						
28. Site(s) Affected: <input type="checkbox"/> EDF <input type="checkbox"/> PVC <input type="checkbox"/> VATC <input type="checkbox"/> EDC <input type="checkbox"/> GSFC <input type="checkbox"/> LaRC <input checked="" type="checkbox"/> NSIDC <input type="checkbox"/> SMC <input type="checkbox"/> AK <input type="checkbox"/> JPL <input type="checkbox"/> EOC <input type="checkbox"/> IDG Test Cell <input type="checkbox"/> Other						
29. Board Comments:			30. Work Assigned To:		31. CCR Closed Date:	
32. SCDV CCB Chair (Sign/Date): Byron Peters /s/ 2/10/02			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
33. EDF CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ECS			
34. ECS CCB Chair (Sign/Date):			Disposition: Approved App/Com. Disapproved Withdraw Fwd/ESDIS ERB Fwd/ESDIS			